

Please type a plus sign (+) inside this box ☒PTO/SB/01 (12-97)
Approved for use through 9/30/00, CMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**SUBSTITUTE
DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**☐ Declaration
Submitted
with Initial
Filing
OR
☒ Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number	IB-1576A
First Named Inventor	Alivisatos, A. Paul
COMPLETE IF KNOWN	
Application Number	09/721,126
Filing Date	November 22, 2000
Group Art Unit	1754
Examiner Name	Bos, S.

RECEIVED
CENTRAL FAX CENTER

NOV 20 2003

OFFICIAL

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**Process for making surfactant capped metal oxide nanocrystals, and products
produced by the process**

the specification of which (Title of the invention)

☐ is attached hereto
OR☒ was filed on (MM/DD/YYYY) **November 22, 2000** as United States Application Number or PCT InternationalApplication Number **09/721,126** and was amended on (MM/DD/YYYY) **August 15, 2003** (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 356(b) of any foreign application(s) for patent or inventor's certificate, or 356(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	YES <input type="checkbox"/>	NO <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/162,299	10/28/1999	

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

11/26/2003 10:01

510-486-7896

LBL PATENT DEPARTMENT

PAGE 03/04

Please type a plus sign (+) inside this box → ☒PTO/SB/01 (12-97)
Approved for use through 9/30/00, OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 35(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application or PGT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
09/702,219	October 30, 2000	

☐ Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02C attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☒ Customer Number: 008076

OR

☐ Registered practitioner(s) name/registration number listed below

Place Customer Number Bar Code Label Here

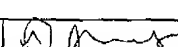
Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number or Bar Code Label: 008076 OR ☐ Correspondence address below

Name			
Address			
Address			
City	State	ZIP	
Country	Telephone	Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
A. Paul		Alivisatos	
Inventor's Signature		Date	8/19/03
Residence: City	Berkeley	State	CA
		Country	United States
Post Office Address	5941 Estates Drive		
Post Office Address			
City	Oakland	State	CA
		ZIP	94611
		Country	United States

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

(Page 2 of 2)

OCT.14'2003 09:54 4087383361

Kovio

#4875 P.001/001

Please type a plus sign (+) inside this box: ☒

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Approved for use through 9/30/05. OMB 0501-0002
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
+
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION				ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1			
Name of Additional Joint Inventor, if any: <input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle (if any))				Family Name or Surname			
Jozsef				Rockenberger			
Inventor's Signature		Jozsef Rockenberger		Date		10/14/03	
Residence: City		Redwood City		State		CA	
				Country		United States	
Post Office Address		23 Birch Street		Citizenship		Germany	
Post Office Address							
City		Redwood City		State		CA	
				ZIP		94086-38	
				Country		United States	
Name of Additional Joint Inventor, if any: <input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle (if any))				Family Name or Surname			
Inventor's Signature				Date			
Residence: City				State			
				Country			
Post Office Address				Citizenship			
Post Office Address							
City				State			
				ZIP			
				Country			
Name of Additional Joint Inventor, if any: <input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle (if any))				Family Name or Surname			
Inventor's Signature				Date			
Residence: City				State			
				Country			
Post Office Address				Citizenship			
Post Office Address							
City				State			
				ZIP			
				Country			

Burden Hour Statement: This form is estimated to take 6.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for